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Amend cus Name Chs

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | AATION: LO | ONDON'S CRAB HOUSE | INC |
|--|--|---|---|
| DOCUMENT NUME | BER: | P10000005070 | |
| The enclosed Articles | of Amendment and fee are | submitted for filing. | |
| Please return all corres | pondence concerning this r | natter to the following: | |
| | GEORGE NICOLAS ABDULNOUR | | |
| | Nam | ne of Contact Person | |
| | CF | O DIRECT INC | |
| Firm/ Company | | | |
| 3320 SE 27TH AVENUE | | | |
| Address | | | |
| | GAINE | SVILLE, FL 3264 32 | 441 |
| | | / State and Zip Code | <u>'</u> |
| | CFODIREC E-mail address: (to be used for | T@YAHOO.COM or future annual report notification) | |
| For further information | n concerning this matter, pl | ease call: | |
| GEORGE NICOL | AS ABDULNOUR, MBA | at (352) 22 | 26-5056 |
| Name of C | Contact Person | Area Code & Daytime Tele | phone Number |
| Enclosed is a check for | r the following amount mad | de payable to the Florida Depart | ment of State: |
| □\$35 Filing Fee | □ \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ✓ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment See Division of Co P.O. Box 6327 Tallahassee, FI | ection rporations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle | e |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

LONDON'S CRAB HOUSE INC

(Name of Corporation as currently filed with the Florida Dept. of State)

| P100000 <u>05070</u> | |
|--|---|
| (Document Number of Corporati | on (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation: | es, this Florida Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporation | <u>n:</u> |
| BEST SEAFOOD PLAC | |
| name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associated to the contain the word "corp abbreviation" and the contain the word "corp abbreviation" above the contain the word "corp abbreviation" are contain the word "corp abbreviation" above the contain the word "corp abbreviation" are contained as a contain the word "corp abbreviation" are contained as a contain the word "corp abbreviation" are contained as a contain the word "corp abbreviation" are contained as a contain the word "corp abbreviation" are contained as a contained | orp," "Inc," or "Co". A professional corporation |
| B. Enter new principal office address, if applicable: | 2304 W EDGEWWOD AVE |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | JACKSONVILLE, FL 32209 |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 3204 W EDGEWOOD AVE |
| | JACKSONVILLE, FL 3229 |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad- | address in Florida, enter the name of the dress: |
| Name of New Registered Agent: | |
| New Registered Office Address: (Flor | ida street address) |
| | , Florida |
| (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam | Agent: iliar with and accept the obligations of the position. |
| Signature of New | Registered Agent, if changing |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

| Title | <u>Name</u> | <u>Address</u> | Type of Action |
|------------|-------------------------------------|--|-----------------------|
| <u> </u> | YASIN KILIC | 2304 W EDGEWOOD AVE JACKSONVILLE, FL 32209 | _ □ Add _ ☑ Remove |
| | | | _ |
| | | | |
| (attach ac | dditional sheets, if necessary). (1 | Be specific) | |
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| provisi | | nge, reclassification, or cancellation of iment if not contained in the amendmen | |
| MR. YASI | IN KILIC, THE FORMER SE | CRETARY SOLD ALL HIS SHARE | S TO MR. ZIA |
| ISAZADE | H, THE PRESIDENT. | | |
| MR. ZIA | ISAZADEH NOW OWNS 10 | 0% OF THE SHARES OF THE CO | RPORATION. |
| | | | |
| | | | - |
| | | | |

| The date of each amendment | t(s) adoption: <u>09/30/2010</u> |
|--|--|
| Effective date if applicable: | 10/01/2010 (date of adoption is required) |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval. |
| | ere approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes | cast for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder |
| Signature _ (By sel | y a director, president or other officer if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court |
| арұ | pointed fiduciary by that fiduciary) |
| | ZIA ISAZADEH |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |